FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) MIKE RALLEL
(b) Address (number and street) Check if address changed Check if address changed 2. Identification Number P60004751
(c) City, State, and ZIP Code 3. Is This New Amended
ARIINGTON $A22209$ Statement (N) OR A
4. Party Affiliation 5. Office Sought 6. State & District of Candidate 1. PRESTENT 1. SA
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DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE
7. I hereby designate the following named political committee as my Principal Campaign Committee for the (year of election)
NOTE: This designation should be filed with the appropriate office listed in the instructions.
(a) Name of Committee (in full)
MIKE GRAVEL FOR PRESIDENT
(b) Address (number and street) (b) Address (number and street) (b) Address (number and street)
(c) City, State, and ZIP Code
ARLINGTON VA 22209
DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)
 I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.
NOTE: This designation should be filed with the principal campaign committee.
(a) Name of Committee (in full)
(b) Address (number and street)
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(c) City, State, and ZIP Code
(c) only, state, and zir code
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DECLARATION OF INTENT TO EXPEND PERSONAL FUNDS (House or Senate Only)
9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by
\cdot . \cdot
9A O for the primary election, and .
9B for the general election.
If you do not intend to expend personal funds exceeding the threshold amount for either election, you must enter "0.00" for each.
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.
Signature of Candidate Date
Muhe Fauel 1/26/08
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.
FE3AN039.PDF FEC FORM 2 (REV. 02/2003)